

III. Application Content and Requirements

A. Program Description (25 page maximum narrative, not including completed required forms or the required attachments)

Please follow the outline and use the numberings and headings listed below as your Program Description Outline. As you develop the narrative, assume the readers are completely unfamiliar with your School Readiness Initiative program, proposed Special Needs Project Demonstration Site, community, and acronyms. Applicants must describe how the Demonstration Site will serve families and children with a broad range of disabilities and other special needs. Applications proposing to focus on a particular type of disability or diagnosis will not be selected for funding.

Throughout the application, applicants must demonstrate their commitment to the CCFC Principles on Equity, interagency collaboration and family support principles including family-centered programming and approaches. Remember to document the role of families in decision-making, as well as other examples of how your program is working with families of children with disabilities and other special needs.

1. **Overview:** Provide a brief overview of your existing First 5 School Readiness Initiative Program.

Factors to address in the narrative:

- a. Please provide an **updated version** of ***Narrative Description of School Readiness Program*** (Attachment 3A) from your original **First 5 School Readiness Initiative Application** (known as Form 3 in the School Readiness Initiative Request for Funding). In the Special Needs Project application narrative briefly summarize what the added value would be with the Special Needs Project.
- b. Using *Program Elements Form* (Attachment 3B) in Column 2 describe the two main strategies your First 5 School Readiness Initiative Program is currently implementing in each of the School Readiness Initiative five essential and coordinated elements. Please be as specific as possible about who provides each strategy.

In Column 3 specify how many children are currently served in each strategy within each element of the First 5 School Readiness Initiative Program in the top box. Then identify the number of children with disabilities and other needs served currently in each strategy in the bottom box. Where known, disaggregate the number of children served by the PEDS category of disability or special need.

In Column 4 specifically describe how your School Readiness Initiative Program currently outreaches to, identifies, and serves children with disabilities and other special needs.

In Column 5 identify gaps that exist for serving children with disabilities and other special needs in each element area.

In Column 6 identify a specific major goal to be achieved in that element area through the Special Needs Project. Address each Special Needs Project emphasis area: universal access to early and periodic screening; improved access to and utilization of services and supports; inclusion of children into School Readiness Initiative and early childhood programs; evaluation to determine effective practices and to improve

the program. Use specific terms to describe proposed new and enhanced services beyond the current First 5 School Readiness Program, the number of children to receive each new service, and the number of children to receive each enhanced service. To avoid creating a parallel system, Demonstration Sites will be expected to build on and coordinate with existing resources.

In the narrative describe how you are documenting children with disabilities and other special needs, including their specific disabilities or needs. Identify the data collection system you are currently using (Proposition 10 Evaluation Data System – PEDS or other system).

- c. Where existing resources are inadequate, describe how new supplemental resources will be built or leveraged. Evidence would include MOUs or Interagency Agreements with community partners and other pertinent local agencies serving children with disabilities and other special needs as summarized on the *Cover Sheet for Agreements with Collaborative Partners (Attachment 4)*. The list in Attachment 4 is not exhaustive and does not list the many community-based organizations and private agencies that exist in each community. Please add those agencies and organizations as appropriate.

2. Universal Access to Screening: Provide a description of the current and proposed system for universal access to screening in the catchment area.

Factors to address in the narrative:

- a. Describe any outreach activities and discuss how these would link with and support Child Find efforts of the local early intervention and special education programs. Specifically address linguistically and culturally competent outreach strategies to reach traditionally unserved/underserved populations (e.g. ethnic groups, immigrants, etc.).
- b. Describe successes, resources, barriers, and gaps in the quantity, quality, and linkages of services encountered in providing universal access to screening that addresses behavioral health; physical health and development; cognitive; social/emotional; and language development for early identification/diagnosis. Include the efforts, if known, of any agencies delivering screening or assessment services as required by laws or regulations.
- c. Describe the current or proposed resources for screening/assessment strategies that are specifically designed and evaluated for use with culturally and linguistically diverse populations including dual-language learners.
- d. Please describe how you will achieve the numbers required for participation. If your catchment area would screen more than 500 children per year, describe how you will support the increased number of children who may require pre-referral intervention or need other services. If your county has a smaller than required number of children available to be screened, you may consider applying as a consortium with one contiguous county. It is anticipated that no more than one consortium application will be selected.

Note: In order to yield compelling data about children and families served by the First 5 Special Needs Project, it is imperative that each Demonstration Site provide early and periodic screening annually for approximately 500 children between the ages of birth to five years. It is anticipated that between 20 and 30 percent of the children screened may warrant pre-referral intervention or referral for further assessment and services. Because funding for this project was determined based on screening approximately 500 children per year, it may not be feasible with the available CCFC and county matching funds to improve access to and utilization of services and supports to a substantially larger number of children.

- 3. Improved Access to Services.** Discuss coordination and allocation of existing resources and how new resources and an improved system will be built to specifically help children with disabilities and other special needs meet their full potential and improve their school readiness in all developmental domains.

Factors to address in the narrative:

- a. Describe the current and proposed community-level efforts to coordinate resources and various funding sources to deliver comprehensive, seamless services for children and their families that include service coordination/case management as appropriate. Include the efforts of any agencies delivering services as required by laws or regulations such as California's Early Start Program (often through the regional center) from birth through 36 months of age (Part C of IDEA) and California's Preschool Special Education Program from age 3 to age 5 (Part B of IDEA). Describe your proposed system and how it would support all children along a continuum of need.
- b. Describe your plan to improve access to or provide services for children (birth to five) and their families, in the area of behavioral/mental health services (prevention, intervention, and treatment).
- c. Provide information about specific efforts underway or planned to ensure that services (including for behavioral/mental health issues) are culturally and linguistically appropriate for a diverse population of young children with special needs and their families.
- d. Describe a plan for enhancing family and community-level capabilities, including education, involvement, and leadership that is inclusive of culturally and linguistically diverse families. Specifically address pre-referral intervention.
- e. Describe current efforts and strategies for working with higher education (including Child Development Permit programs), mental health, infant/toddler developmental services (Early Start/regional center), preK-12 special education, child care and development, health services and health insurance programs, social services, alcohol and drug prevention and treatment agencies, employment, and other relevant family-serving systems. Describe specific partnerships with colleges and institutions of higher education providing preservice and inservice for early childhood teachers, staff and other relevant service providers (medical, dental health, speech therapist, early childhood special educator and so forth) and include those MOUs or agreements with *Attachment 4*.

4. Inclusion of Children. Provide information about inclusive programs within the School Readiness Initiative community.

Factors to address in the narrative:

- a. Describe current strategies and supports for the successful inclusion of children (birth to five) with disabilities and other special needs in various community programs and services, including preschools, childcare and development programs, and other settings. Be sure to address a broad range of disabilities.
- b. Describe steps you have taken or plan to take to develop the skills of early childhood educators/child development providers to provide extensive pre-referral intervention.
- c. Describe how the community addresses the unique needs of culturally and linguistically diverse children with disabilities in inclusive settings, and include current efforts and plans to work directly with culturally and/or linguistically diverse families.
- d. For children (birth to five) with behavioral issues, describe the current and/or proposed system, providers, and other resources for working in natural environments to the maximum extent that is appropriate. Include how the community addresses the unique needs of culturally and linguistically diverse population of young children experiencing social, emotional or behavioral challenges.
- e. Describe strategies that are used to promote a smooth transition of children with disabilities and other special needs from inclusive pre-K programs into the public school system/kindergarten.

5. Infrastructure: Administration, Governance, Work with Collaborative Partners, Professional Development, Fiscal Oversight, and Evaluation.

Factors to address in the narrative:

a. Administration

- 1) Attach the members/positions of the Special Needs Demonstration Site Project Team and identify their qualifications (an organizational chart, brief biographies of lead staff, etc). These attachments are not counted as part of the page limit for the narrative but should not exceed five pages.
- 2) Describe how your Demonstration Site will manage oversight of the activities and deliverables of the Special Needs Project (interface with the Coordination and Training Contractor – CIHS-SSU, participation in meetings and deliverables as described in Section V.C).
- 3) Describe how the Demonstration Site would be integrated with other First 5 initiatives in your county.
- 4) Highlight the experience of members of the School Readiness Initiative staff in leadership roles, participating as visitation/dissemination programs, mentoring other colleagues or providing training.

b. Governance

- 1) Provide information (membership, roles, etc.) on the School Readiness Initiative's existing advisory, leadership, and steering bodies, how often they meet, and how they would contribute to the Special Needs Project.
- 2) Describe the School Readiness Initiative's leadership development for inclusive governance, particularly participation of families and other community members in your catchment area.
- 3) Provide information on representatives from your School Readiness Initiative staff, Commission, governance bodies, and members of the community who were involved in the development of this Special Needs Project Application and their roles.

c. Work with Collaborative Partners

- 1) Using *Cover Sheet for Agreements with Collaborative Partners (Attachment 4)* identify the partners and strategies already in place (some may be contingent on Special Needs Project funding) to meet the needs (including the cultural and linguistic needs) of the children and families in the School Readiness Initiative's community(ies). This provides a baseline and demonstrates community assets that can be mobilized and focused for the Special Needs Project. Attach MOUs or similar documents specifically describing the relationship, role, and resources from these partners. Provide a summary of these partnerships in the narrative emphasizing the partners' roles in supporting children with special needs and their families and how these partners will specifically support and contribute to the Demonstration Site.
- 2) It is highly recommended that MOUs or other agreements be included from the local public early childhood and special education agencies, the local regional center, the local Early Start family resource center, the local Head Start agency, Public Health agency, and Mental Health agency. If you do not have an agreement with one of these relevant agencies, please describe past and current efforts to establish agreements **in the narrative**. Also describe how these types of formal agreements will be developed if the applicant is funded.
- 3) For the partners listed on *Attachment 4*, describe your coordination process to review implementation of the MOUs or other agreements and Demonstration Site progress toward achieving goals and outcomes.

d. Professional Development

- 1) In the narrative, provide an overview of your professional development plan or use an updated/current School Readiness Initiative professional development plan (from the School Readiness Application) as an attachment. If it is not obvious in the School Readiness Initiative's current plan, please elaborate in the narrative on how you have specifically addressed professional development regarding serving children with disabilities and other special needs. Specifically address training to develop skills in pre-referral intervention.
- 2) Describe any existing or proposed local resources for training and technical assistance to staff regarding children with disabilities and other special needs. If including colleges or other institutions of higher education, include agreements or

MOUs indicating that they are willing to incorporate new staff training resources, information and research into their ongoing curriculum.

- 3) Report on any existing or proposed collaborative training or ongoing meetings that provide professional development in the area of children with disabilities and other special needs.
- 4) Describe any new or enhanced training that is needed or anticipated to be provided through the Special Needs Project.

e. Fiscal Oversight

Please provide information on the *Budget Forms (Attachment 5)*. Provide a **budget narrative** that addresses the following:

- 1) The budget must be commensurate with (a) the importance and scope of each primary emphasis area; and (b) the number of children/families to receive new or enhanced services. Be sure that there is a clear connection between the program and the budget.
- 2) Your budget must incorporate adequate staffing allocation (level and expertise) for achieving the project outcomes, the evaluation activities, as well as for interface and work with the coordination and training staff from CIHS-SSU.
- 3) Time and travel for attendance at Special Needs Project-related meetings.
- 4) Identify any in-kind support committed to the Demonstration Site (in-kind support does not count toward local cash match requirement).
- 5) Please describe your strategies for sustainability of this project beyond the Demonstration Site funding period (approximately four years).

f. Evaluation

- 1) Provide information on how you are currently using data to assess, revise, and refine your programs and program model.
- 2) Describe your current method of evaluation (self-report, use of an internal or external evaluator, a continuous improvement model and/or other method) and how the work with the Special Needs Project would be integrated with this method. Please also indicate what system you are using to report state evaluation data.

B. Budget and Matching Funds Certification

1. Form 5A: CCFC and County Match

- a. Provide the amount and sources of required "new" matching funds (new cash match specifically for the Special Needs Project Demonstration Site) from the County Commission (A) and local Funding Partners (B). Calculate the subtotal of the local matching fund commitment for each time period listed. Fiscal years are July 1 through June 30. *Please note: County Commissions and their local partners need to provide at least a 1:1 cash match for funding to a maximum amount of \$1 million total CCFC match.*

- b. Provide the amount of CCFC funds requested specifically for the Special Needs Project Demonstration Site (C). Calculate the total funding to be provided (A+B+C).
- c. To the extent possible, demonstrate increased use of local County Commission and collaborative partner funds to support and sustain the Demonstration Site activities in the School Readiness Program over time. Private funds or in-kind contributions from other agencies demonstrate community support. Additional resources (e.g., facilities, staff, technical assistance, etc.) are important to developing and sustaining the School Readiness Programs but do not count towards the cash 'matching funds' requirement.

2. Form 5B: CCFC Funds Budget

- a. Use Form 5B to provide a separate budget identifying the specific use of CCFC funds.
- b. Identify the County Commission and the applicant. Do not complete the 'Control #' (for CCFC use)
- c. For Demonstration Site services/supports provided using CCFC funds, list the amount for each of the four 'Emphasis Areas.' Provide an estimate of the funds allocated to each area; because some services may relate to more than one area, calculate a portion for each of the related emphasis areas.
- d. Provide a total for CCFC funds that should be the same as the amount listed on the "CCFC Funding" line (C) on Form 5A for each period.

3. Form 5C: Demonstration Site Budget Detail – CCFC Funds

- a. Use Form 5C to provide detailed and specific information about the use of CCFC funds.
- b. Identify the name of the County Commission.
- c. For the Demonstration Site, identify and briefly describe the items in each of the budget categories and list the amount for each: personnel, program expenses, administrative expenses, and equipment/fixed assets.
- d. Provide an estimated budget for each of the five fiscal periods listed and provide total amounts by budget category and by fiscal year.

IV. Application Review Process and Criteria

To assure a strong foundation for future advocacy efforts and ensure that program designs benefit the range of counties, consideration will be given in the selection process to securing a cross-section of geographic and demographic diversity. It is anticipated that applicants will vary in the degree to which they rely on school-based, medically-based or community-based platforms. Consideration will be given in the selection process to a variety of well-designed models with some components already well-developed.

VII. Attachments

Attachment 1: Cover Sheet

First 5 California Special Needs Project Demonstration Site Application for Funding

Return to:
First 5 CCFC
501 J St., Ste. 530
Sacramento, CA 95814
ATTN: Erik Miyao

Due:
October 4, 2004

Part I: Application Information

| | | |
|--------------------|---|---|
| For State CCFC Use | Amount of CCFC Matching Funds Requested for December 2004 - June 2006: | Total Amount of State CCFC Matching Funds Requested (four years): |
| | \$ | \$ |

Name of County Commission:

| | | | |
|---------------------|-----------|-----------------|-----------|
| Executive Director: | | Contact Person: | |
| Address: | | Address: | |
| City: | Zip Code: | City: | Zip Code: |
| Phone: | FAX: | Phone: | FAX: |

Part II: Agreements, Assurances and Certifications (Signature needs to be original, use blue ink.)

The County Commission agrees to:

1. Implement the Special Needs Project and commit resources to work toward meeting each of the expected project outcomes.
2. Collect and report additional information and data that will be necessary for the evaluation of, and ongoing reporting on, the Demonstration Site as described in Section V.D. of the RFA.
3. Provide resources to support the School Readiness Initiative staff in carrying out activities of the Demonstration Site as developed with the Sonoma State University Coordination and Training Staff for the Special Needs Project as described in Section V.C of the RFA.
4. Collaborate with partner agencies as described in the attached MOUs or other agreements.

I certify that all CCFC and County Commission Prop. 10 funds will be used only to supplement existing levels of service and not to fund existing levels of service. No monies shall be used to supplant state or local General Fund money for any purpose, pursuant to Revenue and Taxation Code section 30131.4. The State Commission issued an Advisory Opinion (November 15, 2001) defining "supplantation and supplementation" that is available at the CCFC website (www.ccfc.ca.gov).

I certify that the local, required cash match will be provided as described in this Application.

| | |
|-------------------------------------|------|
| County Commission Chair's Name | Date |
| County Commission Chair's Signature | |

Attachment 2: Participating Schools Form (Attach extra sheets if necessary.)

1. Using the chart below (or a similar chart), please indicate the elementary school(s) served by your School Readiness Initiative Program that will participate in the Special Needs Project and provide the requested information:

| School Name and Address | Kindergarten Enrollment* | Preschool Classes Currently on Campus? If Yes, Describe | Early Childhood Special Education Currently on Campus? Describe |
|-------------------------|--------------------------|---|---|
| | Fall 2001 | | |
| | Fall 2002 | | |
| | Fall 2003 | | |
| | Fall 2004 | | |
| | Kindergarten Enrollment* | Preschool Classes Currently on Campus? If Yes, Describe | Early Childhood Special Education Currently on Campus? Describe |
| | Fall 2001 | | |
| | Fall 2002 | | |
| | Fall 2003 | | |
| | Fall 2004 | | |

* This information will be used to project the number of children in the catchment area. If you have data that suggests a different number than would be projected, please provide it.

2. List school(s) served by this School Readiness Initiative Program that will NOT participate in the Special Needs Project.

Narrative Description of School Readiness Program

A "description" that addresses the questions listed in this section is needed for: a) each School Readiness Program in the county application, and/or b) a district or countywide system with unique school/community descriptors for each participating school (questions 1.b. and c. and 2.c. below) that deliver the 5 'Essential and Coordinated Elements' and that meet fiscal and quality requirements. Each participating County Commission may submit one combined application that includes program narratives and budgets for the proposed School Readiness Programs. Consult the "Guidelines and Tools for Completing a School Readiness Program Application" for full instructions on how to prepare your program narrative.

1. PROGRAM DESCRIPTION

- a. *Provide an overview of the School Readiness Program, including communities to be served and the process used by the County Commission to develop, review, and select this School Readiness Program.*
- b. *What are the strengths and needs of the families and communities served by the targeted schools?*
- c. *What results are expected for children and families?*

2. SERVICES AND PARTNERS

- a. *What strategies and partners are currently in place that address the 5 "Essential and Coordinated Elements"?*
- b. *What new strategies and partners will be implemented to further address or expand/enhance the 5 "Essential and Coordinated Elements"?*
- c. *What are the specific roles and commitments provided by the participating schools?*
- d. *How will coordination/integration of current and new services and resources for this School Readiness Program be addressed and supported?*

3. OPERATIONS

- a. *How has/will collaborative planning and decision making be accomplished?*
- b. *How does your staffing and professional development support the results and strategies for the 5 "Essential and Coordinated Elements" for the children and families to be served?*
- c. *Provide an explanation for your proposed budget. Explain how your budget represents appropriate costs and a cost-effective use of funds for children birth to 5 and their families; reflects both current and new local resources; and shows the integration of County Commission, education, and other partnership funding.*

Attachment 3B: Program Element Form (Attach extra sheets if necessary.)

For each of the five essential and coordinated elements in Column 1, please list the two main strategies (e.g. home visits, parent-participation classes, early childhood classes, community health clinic, family education meetings, etc.) your site is using for each element in Column 2. If partner agencies provide the activity, please indicate this below the specific strategy in Column 2. In Column 3, indicate the total number of children served in each strategy/activity and how many children with disabilities and special needs are currently served in that strategy. For Column 4, list your current efforts for outreach, identification and service for each program element. In Column 5, list the gaps you have identified for this program element. Use Column 6 to indicate at least one specific major goal to be achieved in that element area through the Special Needs Project if awarded the demonstration site funding. See page 13 for more detailed instructions.

| 1 | 2 | 3 | 4 | 5 | 6 |
|------------------------------|--|---|---|---|--|
| Program Element | Strategies & Lead Agency Conducting Strategies | # total children in the activity # of children w/disabilities and special needs served | Current Methods of Outreach, and Serving Children with Disabilities and Other Special Needs | Recognized Gaps in Outreach, Identification and Service | Specific Programmatic Goal You will Commit to Accomplishing through this Project to Improve Outreach, Identification and Service |
| Early Childhood Education | | | | | |
| Parenting and Family Support | | | | | |
| Health and Social Services | | | | | |
| School Capacity | | | | | |
| Program Infrastructure | | | | | |

Attachment 4: Cover Sheet for Agreements with Collaborative Partners

1. Please check partners and attach the existing MOU or similar instrument that specifically describes the relationship, role and resources from each partner.

| | | |
|--|---|---|
| Public Special Education Program <input type="checkbox"/> County Office of Education <input type="checkbox"/> SELPA (Special Education Local Plan Area) <input type="checkbox"/> School District Early Childhood Education (ECE) Programs <input type="checkbox"/> State-Funded ECE Programs <input type="checkbox"/> Head Start/Early Head Start <input type="checkbox"/> Private Programs (including Family Child Care Associations) <input type="checkbox"/> Local Child Care Planning Councils <input type="checkbox"/> Child Care Resource and Referral Agencies | Pertinent Local and County Programs <input type="checkbox"/> Regional Center (Early Start Intake and Service Coordination as well as service coordination for eligible children over age 3) <input type="checkbox"/> Early Start Vendor Program <input type="checkbox"/> Temporary Assistance to Needy Families (TANF) <input type="checkbox"/> Children's Services Bureau (CSB/CPS) <input type="checkbox"/> Early Start Family Resource Center <input type="checkbox"/> Family Empowerment Centers <input type="checkbox"/> Parent Training and Information Centers <input type="checkbox"/> Community Based Organizations <input type="checkbox"/> Community Colleges & Universities | Health Agencies and Programs <input type="checkbox"/> Primary Health Practitioner <input type="checkbox"/> Hospital or Medical Clinic Services <input type="checkbox"/> Child Health & Disability Prevention (CHDP) & Early Periodic Screening, Diagnosis & Treatment (EPSDT) (Note: In many counties this is contracted through the public health department) <input type="checkbox"/> Public Health Nursing (PHN) <input type="checkbox"/> Women-Infants-Children (WIC) <input type="checkbox"/> California Children Services (CCS) <input type="checkbox"/> Mental Health <input type="checkbox"/> Alcohol & Drug Prevention and Treatment <input type="checkbox"/> Private Therapists |
| Other First 5 Funded Programs (List) | Other agencies or entities not listed above (Please List) | |

2. Please identify the agencies, individuals or entities that assist you in meeting the cultural or linguistic needs of your community. In the attached MOU or a similar instrument specifically describe the relationship, role and resources from each partner that address these needs.

Attachment 5: Special Needs Project Demonstration Site Budget Forms

Form 5A

Demonstration Site Estimated Program Budget CCFC & County Funding Match

Applicant County:

Name of Special Needs Project Demonstration Site:

| "Match" Funding Organization | 12/01/04-6/30/05 | 7/1/05-6/30/06 | 7/1/05-6/30/06 | 7/1/05-6/30/06 | 7/1/08-11/30/08 | Total |
|--|------------------|----------------|----------------|----------------|-----------------|-------|
| A. County Commission | | | | | | |
| B. Funding Partners: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total Local Funding for Match | | | | | | |
| C. Requested CCFC Funding* | | | | | | * |
| Total Special Needs Project Demonstration Site Funding (A+B+C) | | | | | | |

The local match requirement is 1:1 (\$1.00 local cash match for every \$1.00 of First 5 CCFC funds).

* The total may not exceed \$1 million total over four years.

Attachment 5: Special Needs Project Demonstration Site Estimated Program Budget
First 5 CCFC FUNDS Only
(Broken down by the four major Emphasis Areas)

Applicant County: _____

Name of Special Needs Project Demonstration Site: _____

Control # (First 5 CCFC use): _____

| Description | | 12/01/04-6/30/05 | 7/1/05-6/30/06 | 7/1/05-6/30/06 | 7/1/05-6/30/06 | 7/1/08-11/30/08 |
|----------------|---|------------------|----------------|----------------|----------------|-----------------|
| 1 | Universal access to early and periodic screening | | | | | |
| 2 | Improved access to and utilization of services and supports | | | | | |
| 3 | Inclusion of children into SR Initiative & early childhood programs | | | | | |
| 4 | Evaluation to determine effective practices and to improve program | | | | | |
| TOTAL * | | | | | | |

* Total of all fiscal year budgets should equal total CCFC funding request, Attachment 5A, Row C

Applicant County: _____

Special Needs Project Demonstration Site: _____

| CCFC FUNDS - Amount Budgeted | | | | | | |
|------------------------------|----------------------|--------------------|--------------------|--------------------|--------------------|---------------------|
| | 12/01/04- 6/30/05 | 7/1/05- 6/30/06 | 7/1/05- 6/30/06 | 7/1/05- 6/30/06 | 7/1/05- 6/30/06 | 7/1/08- 11/30/08 |
| PERSONNEL (describe)* | | | | | | Totals |
| SUBTOTAL | | | | | | |
| PROGRAM EXPENSES | | | | | | |
| SUBTOTAL | | | | | | |
| ADMINISTRATIVE EXPENSES | | | | | | |
| SUBTOTAL | | | | | | |
| EQUIPMENT & FIXED ASSETS | | | | | | |
| SUBTOTAL | | | | | | |
| ANNUAL TOTALS | | | | | | |
| PROGRAM TOTAL | | | | | | |

* Include and specify a position (at least .5 full time equivalent) devoted to evaluation activities as described in Section V.D.